

## ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE    |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION         |          |        |         |
| O.I.P.E. CLASSIFIER       | ✓        | 45     | 5/11    |
| FORMALITY REVIEW          |          |        |         |
| RESPONSE FORMALITY REVIEW | X        |        | 4-08-01 |

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

| Claim       | Date |
|-------------|------|
| Final       |      |
| Original    |      |
| 1 ✓ 5/11/01 |      |
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| Claim    | Date |
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| Claim    | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here